

MATERIAL REVIEWED AT CIV HEADQUARTERS BY
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: TARASOFF, ANA
OFFICIAL PERSONNEL FILE

INCLUSIVE DATES:

CUSTODIAL UNIT/LOCATION: Q / 101

100

DELETIONS, IF ANY:

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE.

SECRET

26 March 1971

MEMORANDUM FOR : Office of Finance/C&TD

SUBJECT : Verification of Contract Service for
Sandra B. CAZAZZUS (P), Terminated Contract Employee

1. During period 8 April 1957 through 8 September 1953, subject served as an Agency Staff Employee. During this period, subject was a participating member of the Civil Service Retirement System.

2. During period 15 July 1964 through 19 October 1970, subject served as a part-time contract employee on a prearranged regular scheduled tour of duty. With respect to this period of service:

(a) Period 15 July 1964 through 7 September 1967 is creditable for purposes of Civil Service Retirement. Since subject was covered by Social Security during this period, Civil Service Retirement deductions were not withheld.

(b) During period 8 September 1967 through 19 October 1970, subject was a participating member of the Civil Service Retirement System.

3. Action Required:

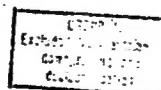
(a) Office of Finance: Please post the above information to subject's retirement records.

(b) DDP/WH/Contracts: For your information.

/s/ D.C. H. [Signature]
Chief
Contract Personnel Division

Distribution:

Orig - O/F/C&TD
1 - WH/Contracts
1 - CPD subject file
1 - CPD chrono



14-00000

11 MAR 1971

MEMORANDUM FOR: Chief, Contract Personnel Division
SUBJECT : Civil Service Retirement Credit

1. It is requested that information be provided as to the creditable service for the Civil Service Retirement program for the following individuals.

[redacted]
Sandra B. CAZAZZUS
[redacted]

2. Although the named individuals are no longer employed by the Organization, the creditable service can be of particular significance to each.

3. Your early attention to the request will be appreciated.

for William V. Broe
Chief
Western Hemisphere Division

SECRET

SECRET**23 March 1971****MEMORANDUM FOR: Contract Personnel Division****SUBJECT : Sandra B. CAZAZZUS**

Following are the total number of hours for each year worked by Sandra B. CAZAZZUS under contract. The information was provided this office by Payroll.

<u>Period of Service</u>	<u>Actual Hours Worked</u>
From 15 Jan 64 To Dec 1964	551 hours
JAN 65 DEC 1965	789
JAN 66 DEC 66 1966	1091
JAN 67 DEC 67 1967	1092
JAN 68 DEC 1968	1486
JAN 69 DEC 1969	1414
JAN 70 19 OCT 1970	1217

This gal had two contracts. The first one included a leave benefit. This first K ended and was immediately replaced by a 2nd K, which included Civil Service Retirement.

From the number of hours worked I feel we can make a determination that she during the full period she worked ~~as~~ in a part-time basis on a prearranged reg. sch. tour of duty. If you concur, I will write a std. type memo to O/Finance.

Subject is now terminated, but in WH field with her husband. Bill Benahan has a dispatch in asking that Hqtrs. verify her total K service.

Paul.
23 Mar 71

OK - DK

SECRET

Contract Service - Sandra B. C. A. Z. A. Z. O (P)

<u>Date</u>	<u>Action</u>	<u>Compensation</u>	<u>Grade</u>
8 Apr 57	CIA Staff Employee service		
8 Sep 63			
15 Jul 64	Contract Employee with Social Security. No LPAs or PSIs.	\$2.59 p.h.	
14 Aug 64	Pay increase	2.72	
10 Oct 65	Pay increase	2.80	
	Authorized future LPAs.	2.82	
3 Jul 66	LPI	2.80	
7 Sep 67	Contract terminated	2.40	
8 Sep 67	Contract Employee with Official Civil Service Retirement and LPAs. No PSIs.	2.40	
8 Oct 67	LPI	3.67	
14 Jul 68	LPI	3.12	GS-05/5
13 Jul 69	LPI	3.37	GS-05/5
28 Dec 69	LPI	3.57	GS-05/5
19 Oct 70	Contract terminated	3.57	"

NOTE: On 24 Mar 1971, subject's official Staff Employee file was reviewed. It reflected; (a) staff employee service from 8 Apr 57 to 8 Sep 63; (b) during entire period was a participating member of the Civil Service Retirement System; (c) she was on LWOP during period 12 Jun-8 Sep 63; and her SF-144, dated 8 Apr 57 reflect no prior Federal Service.

1. LAST NAME TARASOFF	FIRST NAME Anna	INITIAL(S) A	2. APPOINTMENT DATA 978767 F T P T X Subject to Sec 203(d), 1951 Leave Act Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	3. TOTAL SERVICE FOR LEAVE (as of date of separation) Years Months Days <input type="checkbox"/> More than 15 years
4. DATE AND NATURE OF SEPARATION Contract terminated 10/19/70				
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)			SUMMARY OF HOME LEAVE (DAYS)	
5. Balance from prior leave year ended 19 70	ANNUAL 1710	SICK 275	14. Date arrived abroad for HI purposes NOTE	REMARKS SCD 7/15/64
6. Current leave year accrual through 19 70	10/17	256	15. Current balance as of 19	
7. Total		89	16. 12-month accrual rate	
8. Reduction in credits, if any (current year)		56	17. Dates leave used prior 24 months	
9. Total leave taken		0	18. Monthly accrual date	
10. Balance		364	19. Calendar days credit for next accrual date	
		312	20. Date basic service period completed	
11. Total hours paid in lump sum 360hrs 2 holidays			MILITARY LEAVE	
12. Salary rate(s) \$3.57 p/h			21. Dates during current calendar yr	to
13. Lump sum leave dates From 0800. 10/17 to 1700 12/22/70 0 (Hours)			22. Dates during preceding calendar yr	to
24. Certified by <i>G. J. G. M. R.</i> (Signature) Auth. Cert. Officer (Title)			ABSENCE WITHOUT PAY	
25. Standard Form 1150 November 1965 1150-106			LWOP or AWOL or Bulwag Suspension (Hours)	0 0
			23. During leave year in which separated	0 0
			24. During step/increase waiting period which began on 8/14/64	0 0
			25. During 12-month HI accrual period (dates)	

RECORD OF LEAVE DATA TRANSFERRED

U.S. CIVIL SERVICE COMMISSION
FPM SUPPLEMENTS 296-31 AND 990-2

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)			DTPAR 00000000000000000000000000000000	
C131751	LIAZZUS SANDRA R			4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
3. NATURE OF PERSONNEL ACTION				NO DA	CONTRACT-TYPE A (S)
CONTRACT TERMINATION (1BCHLU)				10/10/70	
6. FUNDS		V 10 V	X	V 10 C	7. FINANCIAL ANALYSIS NO CHARGEABLE
		G 10 V	X	G 10 C	8. CSC OR OTHER LEGAL AUTHORITY
9. DOPING INSTITUTION WESTERN HEMISPHERE DIV				10. LOCATION OF SPECIAL STATION C	
11. POSITION TITLE TRANSLATOR				12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) (PART TIME) GS		15. OCCUPATIONAL SERIES 10-501	16. GRADE AND STEP GS 5	17. SALARY OR RATE DOL: 071564 EFT: 071564	
18. STATUS INFORMATION BIRTHDATE: 123 SEX: F MARITAL ST: MAR NC. DEPENDENTS: 00 CITIZENSHIP: US/BIRTH: CONGEVITY: CEMP: 071564 FEC-SERVICE COMPS: TYPE RETIREMENT: CSC HOSPITALIZATION: F PLAN: FEGLI: YES PREV. GOVT SERV: 5 SAL. TASK LIMIT: PAY BASIS: H A/L IND: 3 S/L IND: 3					
19. CONTRACT INFORMATION EFF DATE: 090857 EXPIRATION DATE: 090771 DATE ORIG CONTRACT: 071564 REFERRING OFFICER: WH ADMIN REPR GRDE: WH PHONE: 4-60					
20. ENTITLEMENTS/ELIGIBILITIES/ALLOWANCES TAX STAFF: Y FED EXMF: STATE EXMF: STATE TRAVEL: NNN OPS EXPNSE: N HOUSING: N POST/EQUAL: N HOME LEAVE: O DIFFERENTIAL: N OFFSET CLAUSE: N STD GOVT: N LEGISL PAY: Y PREMIUM PAY: N ALLOWANCE COMM: N EDUCATION: N STEP INCRS: N GTH TAX ENTL: N OTHER ALLOWNS: N SEPARATION: N					
NOTE: ITEMS PRECEDED BY AN ASTERICK (*) REFLECT CHANGED DATA					
SIGNATURE OR OTHER AUTHENTICATION					

SECRET

DUPLICATE

CLEARANCE SHEET FOR TERMINATION OF CONTRACT PERSONNEL		DATE	
THIS FORM MUST BE SIGNED AND SUBMITTED IN DUPLICATE		25 January 1971	
PERSONAL DATA			
NAME (Last, First, Middle - true or pseudonym) CAZAZZUS, Sandra B. (P)	OFFICE AND BRANCH OF ASSIGNMENT DOP/AS/1		
LOCAL ADDRESS Mexico City, Mexico	PERMANENT ADDRESS Cleveland, Ohio		
PERMANENT STATION OR BASE Mexico City, Mexico	POSITION OR FUNCTIONAL TITLE Contract Employee, Type B		
CONTRACT DATA			
DATE CONTRACT EFFECTIVE 15 July 1968	DATE CONTRACT LAST RENEWED 8 September 1970	DATE CONTRACT EXPIRES 7 September 1971	DATE OF CONTRACT TERMINATION 19 October 1970
REASON FOR CONTRACT TERMINATION Retirement of husband.			
INTERNAL STAFF OR DIVISION CLEARANCES (Add or delete as applicable)			
COMPONENT	CLEARED BY	DATE	REMARKS
FINANCE			
LOGISTICS			
SECURITY			
Security			
CONTRACT APPROVING OFFICER	CLEARED BY (Signature) W.S. Benehan, C/As/Contracts		DATE
SCHEDULE OF INTERVIEWING OFFICES (OFFICES NOT REQUIRING INTERVIEW WILL SO INDICATE)			
OFFICE	SCHEDULE		INTERVIEWING OFFICIAL
	DATE	TIME	
CENTRAL COVER STAFF			CLEARED BY (Signature) DATE
OFFICE OF SECURITY PSD		OS #131 751 13 July 64	CLEARED BY (Signature) DATE
OFFICE OF PERSONNEL CPD			CLEARED BY (Signature) DATE
REVIEWED:			
REMARKS (Please initial)			
Duplicate - advance copy to OF/CSTD/CEAS 30 October 1970. 18/ Dow H. Luetscher Special Contracts Officer			
STAFF OR DIVISION AND BRANCH OF ASSIGNMENT C/As/1	SIGNATURE OF STAFF OR DIVISION RESPONSIBLE OFFICER		DATE

HIGH 3 BASED ON LAST 3 YEARS AS CONSIDER

OCT 67 - DEC 67 \$1609.02

JAN - DEC 68 4549.34

JAN - DEC 69 4935.06

JAN - OCT 70 4335.49

$$\$14428.89 \div 3 = \$4809.63$$

HIGH 3 REBATE

$$1\frac{1}{2}\% \times 4809.63 \times 5 = \$360.70$$

$$1\frac{3}{4}\% \times 4809.63 \times 5 = 480.95$$

$$2\% \times 4809.63 \times 2.5 = \underline{240.48}$$

$$\$1022.03 \text{ AMOUNT}$$

HIGH 3 BASED ON LAST 3 YEARS ~~5~~ STAFF

JUN 62 - JUN 63 \$5545 6/6/4

JUN 61 - JUN 62 5160 6/3

JUN 61 - JUN 61 2497 6/2

JUN 60 - DEC 60 3255 5/2

$$\$15457 \div 3 = \$5152.33$$

$$1\frac{1}{2}\% \times \$5152.33 \times 5 = \$386.45$$

$$1\frac{3}{4}\% \times \$5152.33 \times 5 = 450.55$$

$$2\% \times \$5152.33 \times 2.5 = \underline{257.63}$$

$$\$1094.93 \text{ AMOUNT}$$

HIGH 3
AMOUNT

CHAZZIUS (P) TOLKASCE 8 FEB

2. She is not eligible for retirement
annuity until she's 62 yrs old - as
5 May 1985.

STAFF (CSR) Apr 57 - Jun 63. Mar 63
→ **CONTRACT (SS)** Jul 64 - Sept 67
" " **(CSR)** Sept 67 - Oct 70

Resignation effective } \$1787.83
8 Sept 1963 }

57-63 67-70	C5 Deductions while a Staff " Contract	\$1781.83 <u>961.24</u>
	TOTAL	<u>\$2743.07</u>

Sept \$2.90
Oct 67 \$3.03
14 fel 3.12

Oct 20
Left 57

~~Score~~ →
S/F 6.7 \$6.09 Dec 6.7
6.8 \$4549.34
6.9 4935.06
0.0 20 4335.47

13/154233
154233
3/15457.00
1236
1510

DISPATCH		CLASSIFICATION S E C R E T	PROCESSING
TO PRO.	Chief, WH Division		SEARCHED FOR INDEXING NO INDEXING REQUIRED. ONLY QUALIFIED PERSON CAN JUDGE INDEXING
FROM	Chief of Station, Mexico City		INDEXED
SUBJECT	AMERICAN CONTRACTS - Termination Sandra B. CAZZAZZUS		
ACTION REQUIRED - REFERENCES			
<p>1. Sandra B. CAZZAZZUS' contract was terminated effective 19 October 1970. Since her husband is retiring, she will no longer be available for employment.</p> <p>2. Submitted herewith is a signed contract termination and termination secrecy oath.</p>			
 Zachary T. Alberta			
Attachments: Contract termination - - - Orig & 1. h/w Termination secrecy oath - Orig & 1. h/w			
Distribution: Orig & 2 - Chief, WH Division w/att.			
<i>Rec'd 30 OCT 1970</i>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER HMMT 10,578	DATE 22 October 1970	
	CLASSIFICATION S E C R E T	NOS FILE NUMBER	

S E C R E T

TERMINATION SECURITY OATH

I, Sandra B. CAZZAZZUS, am about to terminate my association with the Organization. I realize that, by virtue of my duties with the Organization, I have been the recipient of information and intelligence which concerns the present and future security of our country. I am aware that the unauthorized disclosure of such information is prohibited by the espionage laws of our government which specifically requires the protection of intelligence sources and methods from unauthorized disclosure. Accordingly, I SOLEMNLY SWEAR, WITHOUT Mental RESERVATION OR PURPOSE OF EVASION, AND IN THE ABSENCE OF DURESS, AS FOLLOWS:

1. I will never divulge, publish, or reveal by writing, word, conduct, or otherwise any information relating to the national defense and security and particularly information of this nature relating to intelligence sources, methods, personnel, fiscal data, or security measures to anyone, including, but not limited to, any future governmental or private employer, private citizen, or government employee or official without the express written consent of the Chief of the Organization or his authorized representative.
2. I have been invited to submit in writing any monetary claims I may have against the Organization or our government which may in any way necessitate the disclosure of information described herein. I have been advised that any such claims will receive full legal consideration. In the event, however, that I am not satisfied with the decisions of the Organization concerning any present or future claims I may submit, I will not take any other action to obtain satisfaction without prior written notice to the Organization, and then only in accordance with such legal and security advice as the Organization will promptly furnish me.
3. I do not have any documents or materials in my possession, classified or unclassified, which are the property of, or in custodial responsibility of the Organization, having come into my possession as a result of my duties with the Organization or otherwise.
4. During my exit processing and during my period of employment with the Organization I have been given an opportunity to report all information about the Organization, its personnel, and its operations which I consider should receive official cognizance. Hence, I am not aware of any information which it is my duty, in the national interest, to disclose to the Organization, nor am I aware of any violations or breaches of security which I have not officially reported, except as set forth on the reverse side of this sheet or on other attachments.

1/280 OCT 1970

S E C R E T

mz OS/ID

S E C R E T

Page 2

5. I have been advised that, in the event I am called upon by the properly constituted authorities to testify or provide information which I am advised hereby not to disclose, I will notify the Organization immediately; I will also advise said authorities of my secret commitments to our government and will request that my right or need to testify be established before I am required to do so.

6. I am aware of the provisions and penalties of the espionage laws of our government and am fully aware that any violation on my part of certain matters sworn to by me under this oath may subject me to prosecution under the terms of these laws, and that violation of other portions of this oath are subject to appropriate action, including such dissemination of the violation as the circumstances warrant.

I have read and understand the contents of this oath and voluntarily affix my signature hereto with the full knowledge that this oath was executed for the mutual benefit of myself and our government, and that it will be retained in the files of the Organization for its future use or for reference by me at any time in the future that I may be requested or ordered to testify or disclose any of the matters included within the scope of this oath.

IN WITNESS WHEREOF, I have set my hand and seal this 16 day of
October 19 70.

Sandra B. CAZAZZUS (SEAL)
Signature Sandra B. CAZAZZUS

Witnessed by me this 16 day of October 19 70,
at Mexico City, Mexico

Eric H. Farnsworth
Signature

S E C R E T

S E C R E T

Miss Sandra B. CAZAZZUSDear Miss CAZAZZUS

You are hereby notified that your services under a contract with the United States Government, effective 8 September 1967, are to be terminated at the convenience of the United States Government pursuant to paragraph 4 of said contract, and that the 30 days' notice required by the contract begins 19 September 1970.

You are reminded of the contents of paragraph 4 of said contract which read as follows:

"Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by the United States Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under applicable laws and regulations."

Your signature in the space provided below is acknowledgement of the contents hereto.

UNITED STATES GOVERNMENT

By Roger T. O'Day
Field Contracting Officer

Acknowledged:

Sandra B. Cazazzus

Witness:

James H. Farnham

Reviewed:

Contract Approving Officer

S E C R E T

See file # MUR-10578
20 Oct 70
being routed with (16-61)
from "shel"

SECRET

DATE
12 Oct 70

NON-STAFF PERSONNEL DATA SHEET

- INSTRUCTIONS:
1. SUBMIT FOR:
 - A. CONTRACT EMPLOYEES (TYPE A, B AND CARRIER)
 - B. INDEPENDENT CONTRACTORS UNDER WRITTEN CONTRACT OR NOC (US CITIZENS OR RESIDENT ALIENS ONLY)
 2. THIS FORM IS NOT APPLICABLE FOR OPERATIONAL OR FIELD AGENTS
 3. COPIES OF THE FORM WILL BE RETAINED BY THE ORIGINATING COMPONENT (NUMBER OF COPIES AT ITS DISCRETION) AND BY CPS/AGENT BRANCH (1 COPY ONLY)

NAME (LAST, FIRST, MIDDLE)			SEX	DATE OF BIRTH
CAZANOVAS, Sandra B. (P)			Female	5 May 23
Marital Status	No. Dependents	Year(s) of Birth	Nationality	Last Medical Exam
Married	2	1945, 49	U.S.A.	Unknown
DATE OF LATEST SECURITY/OPERATIONAL APPROVAL			COMPONENT	
Type B, 13 July 1964	EFFECTIVE DATE	EXPIRATION DATE	JOB TITLE	DDP/WH/1
Type B	15 July 64	7 Sep 71	Transcriber	PROJECT OR FAM #
BENEFITS			GRADE EQUIVALENT	SUPPORT
SOCIAL SECURITY			GS-5/6	YES NO
FECA DEATH AND DISABILITY				X
ANNUAL AND SICK LEAVE				X
CIVIL SERVICE RETIREMENT				X
CIA RETIREMENT OR COMMERCIAL CIA ANNUITY				X
FEDERAL EMPLOYEES GROUP LIFE AND HEALTH INSURANCE				X
CONTRACT LIFE AND HEALTH INSURANCE				X
MISSING PERSONS BENEFITS				X
OTHER (EXPLAIN)				
NON-CIA EDUCATION				
High School Graduate				

NON-CIA EMPLOYMENT				
DATES FROM - TO	EMPLOYER	LOCATION	FUNCTION	SALARY
1944-45 1955-56	Cleveland Trust Company American Trust Company	Cleveland, Ohio San Leandro, California	Bookkeeper Commercial Bookkeeper	

CIA TRAINING

CIA EMPLOYMENT HISTORY (BEGINNING WITH EOD)						
DATES FROM - TO	FUNCTION	CCNTR. CAT.	LOCATION	PROJECT	SALARY	GRADE EQUIV.
Apr 57-Jun 63	Clerk-Typist	Staff	Hqs		EGD as Resign as	GS-4 GS-6
Jul 64-present	Transcriber	B	Mexico City	SUPPORT	\$3.67	GS-5/6

SECRET

FACTORS AFFECTING SUBJECT (POTENTIAL TALENT, RECORD, ETC.) KNOWN OR SUSPECTED IDENTIFICATION TO OTHER THAN CIA STAFF PERSONNEL, INTELLIGENCE, OR SECURITY SERVICES.

COVER

A. PRESENT COVER IS: OFFICIAL NON-OFFICIAL
DIVISION EVALUATION OF COVER SECURITY:

Satisfactory

EVALUATION OF PERFORMANCE:

Satisfactory

ADAPTABILITY (SUBJECT AND FAMILY) TOWARDS DUAL LIFE

No problem.

B. PREVIOUS COVER WAS: OFFICIAL NON-OFFICIAL (GIVE BRIEF DESCRIPTION IF NOC)

MOBILITY

INDICATE LIMITING FACTORS BOTH PERSONAL AND OPERATIONAL

FUTURE UTILIZATION

INDICATE PLANS OR RECOMMENDATIONS FOR USE AFTER CURRENT ASSIGNMENT

None

CCS/CTS
6697
12 October 1970

MESSAGE FORM
TOTAL COPIES: 21

S E C R E T

ROUTING ANSWER INITIALS + SIGN BY			
1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16
17	18	19	20
21	22	23	24
25	26	27	28
29	30	31	32
33	34	35	36
37	38	39	40
41	42	43	44
45	46	47	48
49	50	51	52
53	54	55	56
57	58	59	60
61	62	63	64
65	66	67	68
69	70	71	72
73	74	75	76
77	78	79	80
81	82	83	84
85	86	87	88
89	90	91	92
93	94	95	96
97	98	99	100

FILE SECRETARIAL DISSEMINATION

INDEX NO INDEX RETURN TO _____ BRANCH FILE RIO

PER _____

FILE IN CS FILE NO. _____

REF: CCS.2

FILE VR.

10/78, 0602, 053, OP3

(date) (reference number)

(classification)

(date and time filed)

S E C R E T

CITE DIRECTOR

MEXICO CITY

077.157

JBCENT/ADMIN

1. PLEASE ADVISE DOUGLAS J. FEINGLASS AND SANDRA B. CAZAZZUS THAT THE FLAT RATE TAX HAS INCREASED TO 18.4 PER CENT EFFECTIVE WITH PAY PERIOD ENDING 20 SEPTEMBER 1970.
2. STATION SHOULD START WITHHOLDING TAX AT HIGHER RATE IMMEDIATELY. DISPATCH FOLLOWS.

END OF MESSAGE

COORD:

W.H./F.I.N.C.

W.H./CON

W.H./F.I.N.C. Rejim Shatay

Rejim Shatay

C/CCS/CTS

C/WH/SS

14 OCT 1978

RELEASING OFFICER

COORDINATING OFFICERS

S E C R E T

GROUP 1
Excluded from automatic
downgrading and
declassification

AUTHENTICATING
OFFICER

REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED.

COPY NO.

14 00000
S E C R E T

Miss Sandra B. CAZZUS

Dear Miss CAZZUS

Reference is made to your contract with the United States Government, as represented by the Contracting Officer, effective 8 Sept. 1967, as amended, which expires 8 Sept. 1970.

Effective 8 Sept. 1970, said contract, as amended, is extended for one (1) year.

All other terms and conditions of said contract, as amended, remain in full force and effect.

UNITED STATES GOVERNMENT

By L. J. C.
Contracting Officer

Accepted:

Sandra B. Cazzus

Concur: J. H. L.
Date: 10 Oct. 1970

Witness:

Z. M. Drury, Jr. Contracting Officer

Approved:

REVIEWED:

/s/ Dow H. Luetscher

Special Contracting Officer

S E C R E T

~~SECRET~~

Chief of Station, Mexico City

**Chief, WH Division
ADMIN/CONTRACTS
Sandra B. CAZZUS, Contract Provisions**

Reference: HMMT-9892

1. Reference indicated Sandra B. CAZZAZZUS is a Contract Employee who is required to perform her duties during various hours of the day as well as a varying number of hours in order to meet operational deadlines.

Reference is made that the contract for CAZAZZUS be amended to provide reimbursement of six hours per day when in a leave status and for paid holidays retroactively to 8 September 1967.

2. The request is answered by the Station's explanation--unless and until there has been established in advance a regular tour of duty, an individual is not eligible for leave or holiday pay (see FHB 20-1 and FR 20-13).

In the event the basic criteria is met (FHB 20-1), the effective date could not be retroactive.

Hugh E. WESTBY

Distribution: 2-COS, Mexico City

CROSS REFERENCE NO.	DISPATCH SYMBOL AND NUMBER	DATE
	HMMS-6559	23 Sept 1969
	CLASSIFICATION	THIS FILE NUMBER
S E C R E T		
1-WH/1 1-WH/Contracts 1-WH/Registry	OFFICE	RECEIVED BY
	<u>WH/Contracts</u>	<u>M.R. Neenan</u>
	DATE	EXT
	<u>17 Sept 69</u>	<u>4460</u>
OFFICE STABOL	NAME	GRADE NAME
C/WH/1	<u>George R. Thompson</u>	<u>George R. Thompson</u>
STABOL NAME	DATE	DISPATCH NUMBER
C/WH/SS		<u>George R. Thompson</u>

UNCLASSIFIED INTERNAL
ONLY CONFIDENTIAL SECRET

ROUTING AND RECORD SHEET

SUBJECT (Optional)

Anna A. Tarasoff

FROM:		EXTENSION	NO.
RID/D&P/INCOMING GB-12		x7737	112222-2892
TO: (Officer designation, room number, and building)		DATE	DATE
		RECEIVED	FORWARDED
OFFICER'S INITIALS			
COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)			
1. Chief/WH/Reg.	11 SEP 1969		<i>[initials]</i>
2.			
3. <i>PLW/H/SS</i>			<i>[initials]</i>
4.			
5. <i>W/H/contract</i>	13 Sep 1969	13 Sept 1969	<i>[initials]</i>
6. C/WH/1			<i>[initials]</i>
7.			
8. WH/Contracts			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

Your comments please.

Subject's contract already provides for sick and annual leave effective 15 July 64, and she is considered a part-time contract employee on a regularly scheduled tour of duty. Subject's contract does not provide for overtime and holiday time. Her contract would have to be amended to include this provision.

6-8
*Please advise that under
 law of contract
 cannot approve same
 3 regular.*

[Signature]

DISPATCH		CLASSIFICATION S E C R E T	PROCESSING ACTION
			MAILED FOR INDEXING
TO	Chief, WH Division		NO INDEXING REQUIRED
INFO.			ONLY QUALIFIED DESK CAN JUDGE INDEXING
FROM	Chief of Station, Mexico City		MICROFILM
SUBJECT	ADMIN/CONTRACTS Sandra E. CAZZAZZUS (C/E) (132830) - Contract Entitlements		
ACTION REQUIRED - REFERENCES			
<p>References: A. Book Dispatch - 6496 B. Book Dispatch - 6144</p> <p>1. Subject is a contract employee who is required to perform her duties during various hours of the day (including a varying number of hours) in order to meet operational deadlines.</p> <p>2. Even though CAZZAZZUS' contract allows her annual and sick leave benefits, she has not been reimbursed for any leave during the period 8 September 1967 to the present. In addition, the Station has not reimbursed her for any holidays, WOLADY or local, while other contract employees whose contracts call for a regularly scheduled tour of duty, have received compensation.</p> <p>3. Since subject has worked an average of 30 hours per week, with Headquarters concurrence, it is recommended that she be reimbursed six hours per day when in a leave status and for paid holidays retroactively to 8 September 1967, the effective date of her present contract.</p> <p style="text-align: right;"><i>John D. Biggeman</i> for John A. KAGERT</p>			
<p>Distribution:</p> <p>4 - C/WHD</p> <p style="text-align: center;">[Redacted]</p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER HMOT - 9892	DATE 3 September 1969	
	CLASSIFICATION S E C R E T	HQS FILE NUMBER	

S E C R E T

MEMORANDUM FOR : Office of Finance

FROM : Contract Personnel Division
SUBJECT : Contract Extension for
~~John L. B. Carrigan~~

1. Effective 8 September 1969 the contract (as amended) for the subject individual, effective 8 September 1967, is extended for a period of one (1) year.
2. All other terms and conditions of the contract (as amended) remain in full force and effect.

UNITED STATES GOVERNMENT

BY _____
Contracting Officer

80/04

5 Sept 69

S E C R E T

Group 1 Excluded from automatic downgrading and declassification

۱۰۷

MEMORANDUM FOR: Chief, Contract Personnel Division
SUBJECT : Contract Extension

It is requested that the contract for the following named individual(s) be amended to extend the term as indicated.

Tajaneff, Anna C.
CAZZAZZUS, Sandra B.

Through 7 September 1970

Western Hemisphere Division

William V. Broe

chie

Western Hemisphere Division

SECRET

14 00000
SECRET

DATE: _____

CTC No. _____

MEMORANDUM FOR: Director of Finance
ATTENTION: Chief, Compensation and Tax Division
VIA: Chief, Contract Personnel Division
SUBJECT: Tax Assessment for _____

1. A flat rate covert tax assessment of this individual's gross, taxable Agency entitlements has been approved as indicated below. An acknowledged Letter of Tax Instruction has been will will not be forwarded. The Station/Base will be has been advised of this assessment.

Tax Assessment Rate	Effective Date
one and three-tenths (1.3) per 100	14 December 1971

2. This is a new assessment a revised assessment

3. Other payroll factors pertinent to this tax assessment action are as follows:

CONTACT APPROVAL:

/s/ Dow H. Luetzschef

Chief, C.P.D.

APPROVED:

Executive Secretary, Covert Tax Board

DISTRIBUTION: Orig & 1 - Addressee: 1 Copy CPO; 1 Copy Area Division; 2 Copies CCS

FORM 2643 OBSOLETE PREVIOUS EDITIONS
9-69

SECRET

11-4-211

3 - CPO

S E C R E T

Chief of Station, Mexico City

Chief, WOGAKA

Douglas J. FEINGLASS (p)
ADM/JBCENT - Sandra B. CAZAZZUS (p) - Revision of Tax Assessment Rate

REFERENCE: Letter of Tax Instruction, HAMS-5711, 14 Dec 1967

1. Please advise FEINGLASS that his flat rate percentage tax assessment has been revised by the Tax Staff from thirteen and nine-tenths (13.9) per cent, established by reference, to twenty and eight-tenths (20.8) per cent, effective 29 June 1969, T/Y 1969. This revision is necessary as his income and tax position have changed to such a degree as to make the previous tax assessment rate unrealistic. A computation of the revised tax rate is attached.

2. This assessment revision is incorporated by reference as an amendment to FEINGLASS' Letter of Tax Instruction.

3. From the information submitted to the Tax Staff, it appears that FEINGLASS' daughter qualifies as a dependent. The new tax computations are based on five exemptions. Also, FEINGLASS should list five exemptions on his 1969 tax return.

VICTOR D. UNITSKY

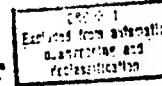
Attachment: As Noted

Distribution:

Orig. & 1 - COS (w/att)
1 - C/CPD (wo/att)
1 - OF/C&TD/CPB (wo/att)
1 - C/WH/1 (wo/att)
1 - WH/Contracts

HAMS-6524

11 August 1969



S E C R E T

14 00000

NOTE FOR FILE:

CAZAZZUS' husband's (FEINGLASS) retirement
date extended to Nov. 70.

25 JUN
1969
att

DISPATCH		CLASSIFICATION SECRET/[REDACTED]	PROCESSING PROMO FOR IND <input checked="" type="checkbox"/> NO PUBLISHING REQUIRED GRLY GUARDED RISK CAN JUDGE INFLUENC
TO	Chief, WH Division		
FROM	Chief, SB Division		
SUBJECT	Chief of Station, Mexico City (RELEASER) Annual Fitness Report - Sandra B. CAZAZZUS ACTION REQUIRED - REFERENCES		MICROFILM
<p>1. Attached are copies of an Annual Fitness Report on Sandra B. CAZAZZUS.</p> <p>2. CAZAZZUS and her husband make a good and efficient team on the duties assigned to them.</p> <p><i>Willard C. Curtis</i> Willard C. CURTIS</p> <p>orig routed to: CWT/CXO, 11 Feb 69 DCP/CD, 11 Feb 69 CWT/1, ? CWT/Contracts, 18 Feb 69 CPO 19 FEB 1969</p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER HMT-9523	DATE 29 January 1969	
	CLASSIFICATION SECRET/[REDACTED]	MOSS FILE NUMBER	

SECRET

FIELD TRANSMITTAL - FITNESS REPORT

INSTRUCTIONS

The following items of the Fitness Report will NOT be completed by field personnel preparing the report for transmitted to Headquarters:

SECTION A, Items 1, 6, and 7

SECTION D, Items 1, 2, and 3 (only in respect to "Typed or Printed Name and Signature")

1. I CERTIFY THAT I HAVE SEEN THIS FITNESS REPORT	DATE 28 January 1969	TYPED OR PRINTED NAME AND SIGNATURE OF EMPLOYEE (in pseudonym) Sandra B. CAZAZZUS <i>S. B. Cazzus</i>
2. I CERTIFY THAT, EXCEPT FOR ITEMS OMITTED UNDER THE ABOVE INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHED FITNESS REPORT HAVE BEEN COMPLETED UNDER PROVISIONS OF CURRENT INSTRUCTIONS OR REGULATIONS		
DATE 28 January 1969	TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR (in pseudonym) Francis J. COIGNE <i>Francis J. Coigne</i>	
DATE 28 January 1969	TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL (in pseudonym) Willard C. CURTIS <i>Willard C. Curtis</i>	

SPECIAL NOTE

Fitness Reports must be prepared with due regard for security considerations. For example, in the case of administrative and support personnel and others whose duties do not in themselves reveal sources of information and methods of operation, it is normally expected that a complete and realistic statement of specific duties may be reported in Section B. However, the nature, source, purpose or disposition of information or operations will not be included. On the other hand, the position titles and description of specific duties of certain other employees may jeopardize security and should not be fully reported on this form. In these cases, general statements of specific duties will be included in Section B indicating the level of responsibility.

FORM 450 OBSOLETE PREVIOUS EDITIONS.

SECRET

(4)

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
CAZAZZUS Sandra B.			5 May 1923	F	S. SD.
6. OFFICIAL POSITION TITLE Contract Employee			7. OFF/DIV/BR OF ASSIGNMENT DDP/MR/1		8. CURRENT STATION Mexico City
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CARRIER-PROVISIONAL (See Instructions - Section C)			10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE
11. SPECIAL (Specify) Contract employee			12. REPORTING PERIOD (From To) 1 January 1968 thru 31 December 1968		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise. (Indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Selecting and processing transcripts in Spanish and English into workable format for Station analysis and filing.					RATING LETTER B
SPECIFIC DUTY NO. 2 Handling administrative matters for her husband.					RATING LETTER B
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
					RATING LETTER B

SECRET

(Type or Print)

SECTION C**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. Suggest suggestions made for improvement of work performance. Also recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

This employee continues to assist and compliment her husband, a Staff Agent, in an unusually efficient team. She pre-edits transcribed materials and puts usable material into a form ready for filing, thus saving analytical and clerical time in the Station. Her knowledge of Russian and Spanish, analytical ability, overall efficiency and interest in her work all contribute to a fine performance.

SECTION D**CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
28 January 1969	Sandra B. CAVALIERUS (signed in pseudo on Field Transmittal)	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
28 January 1969		(signed in pseudo on Field Paul L. Dillon Transmittal)
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
The reviewing officer concure with this report. Subject and her husband continue to form an efficient and valuable team.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 January 1969	Chief of Station	(Signed in pseudo on Field Winston M. Scott Transmittal.)

SECRET

DISPATCH

		CLASSIFICATION S E C R E T	PROCESSING ACTION
TO	Chief, WOMOLD	<input checked="" type="checkbox"/>	MARKED FOR INDEXING
INFO.	Chief, WH Division	<input checked="" type="checkbox"/>	NO INDEXING REQUIRED ONLY QUALIFIED DESK CAN JUDGE INDEXING
FROM	Chief of Station, Mexico City		MICROFILM
SUBJECT	ADMINISTRATIVE/TRAINING Language Training		

ACTION REQUIRED REFERENCES

ACTION REQUIRED: Information Only

As of 1 March 1968 the below listed personnel were receiving voluntary Spanish language training paid for by the organization or LINCOLD:

Sandra B. CAZZAZZUS
 Francis J. COIGNE
 Humphrey K. LEADSHIP
 Douglas J. FEINGLASS
 Henry N. LANGDON
 Keith R. LEVENDERIS
 Wanda G. PANKPINTO
 Clarice F. PARDECK
 Cora B. RAUSKIND
 Joseph F. TRECANTI

and the wives of Walter W. CORNBURY and Gerald D. FAHLANGER.

for/Willard C. CURTIS

DISTRIBUTION:

2 - Chief, WOMOLD
 2 - Chief, WH Division

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER HMMT-8919	DATE 9 April 1968
	CLASSIFICATION S E C R E T	NOS FILE NUMBER

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM**

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
CAZAZZUS	Sandra	B	1923	
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here _____
if you
WANT BOTH
optional and
regular
insurance

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

(A)

Mark here _____
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

(B)

Mark here _____
if you
WANT NEITHER
regular nor
optional
insurance

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

(C)

**4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

Sandra B. Cazazzus

DATE

DUPLICATE COPY—For Agency Use

3

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

FEB 1968
5
CON

See Table of Effective Dates on back of Original

STANDARD FORM No. 1764
JANUARY 1968
(For use only from April 14, 1968)
GSA GEN. REG. NO. 101

Approved GSA 50-RD 385

ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE

Statistical Stub (SF 176-T)

To be completed only by employees who checked either box "A" or box "C" on the election form.
The purpose of this stub is to furnish statistics on the initial registration under the liberalized life insurance program.

1. Which box did you check?		Box A <input type="checkbox"/> 1
		Box C <input type="checkbox"/> 2
2. Did you have regular insurance under the Federal Employees Group Life Insurance Program on January 1, 1968?		Yes <input type="checkbox"/> 1
		No <input type="checkbox"/> 2
3. Your sex?		Male <input type="checkbox"/> 1
		Female <input type="checkbox"/> 2
4. Are you now married?		Yes <input type="checkbox"/> 1
		No <input type="checkbox"/> 2

DISPATCH**CLASSIFICATION****SECRET****PROCESSING ACTION**

MARKED FOR INDEXING

TO Chief of Station, Mexico City	NO INDEXING REQUIRED
FROM Chief, Western Hemisphere Division	ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT Sandra B. CAZZAZUS	MICROFILM
ACTION REQUIRED - REFERENCES	

Please forward a completed form 89 on
 Sandra B. CAZZAZUS for review by the Medical
 Staff.

Hugh E. WESTBY

Distribution:
 2-COS, Mexico City

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE		
	HMTS-5798			
	CLASSIFICATION	MOS FILE NUMBER		
	SECRET			
	ORIGINATING			
	OFFICE	OFFICER	TYPE	EX.
	WH/Personnel		/Ivr #6 Feb. 68	681
	COORDINATING			
1 - WH/Pers	OFFICE SYMBOL	DATE	OFFICER'S NAME	
1 - WH/Reg	C/WH/Pers			
1 - WH/1	C/WH/1			
	RELEASING			
	OFFICE SYMBOL	DATE	OFFICER'S SIGNATURE	
	C/WH/SS		George R. Thompson	

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A					
GENERAL					
1. NAME CAZZUS Sandra B.		2. DATE OF BIRTH 5 May 1923	3. SEX F	4. GRADE	5. SD
6. OFFICIAL POSITION TITLE Contract Employee		7. OFF/DIV/BR OF ASSIGNMENT DDP/MR/1		8. CURRENT STATION Mexico City	
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)		10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE SPECIAL (Specify):	
11. DATE REPORT DUE IN O.P. Contract employee		12. REPORTING PERIOD (From- to) 1 January 1968 thru 31 December 1968			
SECTION B					
PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Selecting and processing transcripts in Spanish and English into workable format for Station analysis and filing.					RATING LETTER S
SPECIFIC DUTY NO. 2 Handling administrative matters for her husband.					RATING LETTER S
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER S

SECRET

(When Filled In)

SECTION C**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence if required for present position. Anytime or example ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

This employee continues to assist and compliment her husband, a Staff Agent, in an unusually efficient team. She pre-edits transcribed materials and puts usable material into a form ready for filing, thus saving analytical and clerical time in the Station. Her knowledge of Russian and Spanish, analytical ability, overall efficiency and interest in her work all contribute to a fine performance.

SECTION D**CERTIFICATION AND COMMENTS**1. **BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
28 January 1969	Sandra B. CAZAZZUS (signed in pseudo on Field Transmittal)

2. **BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
--	---

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE (signed in pseudo on Field Paul L. Dillon Transmittal.)
28 January 1969		

3. **BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

The reviewing officer concurs with this report. Subject and her husband continue to form an efficient and valuable team.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE (signed in pseudo on Field Winston M. Scott Transmittal.)
28 January 1969	Chief of Station	

SECRET

FIELD TRANSMITTAL - FITNESS REPORT

INSTRUCTIONS

The following items of the Fitness Report will NOT be completed by field personnel preparing the report for transmitted to Headquarters:
 SECTION A, Items 1, 6, and 7
 SECTION D, Items 1, 2, and 3 (Only in respect to "Typed or Printed Name and Signature")

1. I CERTIFY THAT I HAVE SEEN THIS FITNESS REPORT	DATE	TYPED OR PRINTED NAME AND SIGNATURE OF EMPLOYEE (In pseudonym)
	28 January 1969	Sandra B. CAZAZZUS
2. I CERTIFY THAT, EXCEPT FOR ITEMS OMITTED UNDER THE ABOVE INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHED FITNESS REPORT HAVE BEEN COMPLETED UNDER PROVISIONS OF CURRENT INSTRUCTIONS OR REGULATIONS		
DATE	TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR (In pseudonym)	
28 January 1969	Francis J. COIGNE	
DATE	TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL (In pseudonym)	
28 January 1969	Willard C. CURTIS	

SPECIAL NOTE

Fitness Reports must be prepared with due regard for security considerations. For example, in the case of administrative and support personnel and others whose duties do not in themselves reveal sources of information and methods of operation, it is normally expected that a complete and realistic statement of specific duties may be reported in Section B. However, the nature, source, purpose or disposition of information or operations will not be included. On the other hand, the position titles and description of specific duties of certain other employees may jeopardize security and should not be fully reported on this form. In these cases, general statements of specific duties will be included in Section B indicating the level of responsibility.

FORM 450 OBSOLETE PREVIOUS EDITIONS.

SECRET

(4)

DISPATCH		CLASSIFICATION	PROCESSING ACTION
		SECRET	MARKEED FOR INDEXING
TO	Chief of Station, Mexico City		NO INDEXING REQUIRED
INFO.			ONLY QUALIFIED DISK CAN JUDGE INDEXING
FROM	Chief, NOGAVE		MICROFILM
SUBJECT	AIR/JCENT - FEINGLASS/CAZAZZUS - Tax Administration		
ACTION REQUIRED - REFERENCES			
REF: MINT-8732, 15 December 1967			

1. Forwarded under separate cover is the name and address of the [redacted] for FEINGLASS to use on his tax return. Also forwarded under separate cover is a brief outline of the nature of the [redacted].
2. As previously discussed in a Headquarters tax briefing, this [redacted] would not issue any tax documentation and was not to be used for any purpose other than their tax return. This return was to be kept in a safe place, since the return would indicate a different cover than what they are using in Mexico.
3. In the event FEINGLASS ever indicates that the use of the [redacted] is necessary for purposes other than the tax return, this requirement should be cleared by Headquarters prior to actual use.

VICTOR D. UNITSKY

Distribution:

Orig. & 1 - COS (v/SCA)
 1 - WI/Contracts (vo/att) ✓

Attachment (USC)

SECRET

FIELD TRANSMITTAL - FITNESS REPORT

INSTRUCTIONS

The following items of the Fitness Report will NOT be completed by field personnel preparing the report for transmitted to Headquarters:

SECTION A, Items 1, 6, and 7

SECTION D, Items 1, 2, and 3 (Only in respect to "Typed or Printed Name and Signature")

1. I CERTIFY THAT I HAVE SEEN THIS FITNESS REPORT	DATE	TYPED OR PRINTED NAME AND SIGNATURE OF EMPLOYEE (In Pseudonym)
	16 FEB. 68	SARINA B. CATAZEROS (Signature)
2. I CERTIFY THAT, EXCEPT FOR ITEMS OMITTED UNDER THE ABOVE INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHED FITNESS REPORT HAVE BEEN COMPLETED UNDER PROVISIONS OF CURRENT INSTRUCTIONS OR REGULATIONS		
DATE	TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR (In Pseudonym)	
16 Feb-1968	Francis J. COIGNE (Signature)	
DATE	TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL (In Pseudonym)	
16 Feb-1968	Willard C. CURTIS (Signature)	
SPECIAL NOTE		
Fitness Reports must be prepared with due regard for security considerations. For example, in the case of administrative and support personnel and others whose duties do not in themselves reveal sources of information and methods of operation, it is normally expected that a complete and realistic statement of specific duties may be reported in Section B. However, the nature, source, purpose or disposition of information or operations will not be included. On the other hand, the position titles and description of specific duties of certain other employees may jeopardize security and should not be fully reported on this form. In these cases, general statements of specific duties will be included in Section B indicating the level of responsibility.		

FORM 450 OBSOLETE PREVIOUS EDITIONS

SECRET

(4)

SECRET (When Filled In)		EMPLOYEE SERIAL NUMBER			
FITNESS REPORT					
SECTION A GENERAL					
1. NAME (Last) <u>CATAZEROS</u>	(First) <u>SARINA</u>	(Middle) <u>B.</u>	2. DATE OF BIRTH <u>5 May 23</u>	3. SEX <u>F</u>	4. GRADE <u>S. SD</u>
6. OFFICIAL POSITION TITLE <u>Contract Employee</u>			7. OFF/ DIV/ BR OF ASSIGNMENT <u>DIP/MI</u> 8. CURRENT STATION <u>Mexico City</u>		
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input checked="" type="checkbox"/> XX SPECIAL (Specify) <u>Contract Employee</u>			10. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN Q.P.			12. REPORTING PERIOD (From - To) <u>1 January 1967 - 31 December 1967</u>		
SECTION B PERFORMANCE EVALUATION					
<p><u>W - Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><u>A - Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><u>P - Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><u>S - Strong</u> Performance is characterized by exceptional proficiency.</p> <p><u>O - Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 <u>Selecting and processing transcripts in Spanish and English into workable format for Station analysis and filing.</u>	RATING LETTER <u>S</u>				
SPECIFIC DUTY NO. 2 <u>Handling administrative matters for her husband.</u>	RATING LETTER <u>S</u>				
SPECIFIC DUTY NO. 3	RATING LETTER				
SPECIFIC DUTY NO. 4	RATING LETTER				
SPECIFIC DUTY NO. 5	RATING LETTER				
SPECIFIC DUTY NO. 6	RATING LETTER				

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject continues to complement her husband as a part of an efficient team. Her expeditious processing of transcript materials (so that they come to the Station ready for filing) saves the Station a great deal of work and time. Her language and analytical abilities are utilized to pre-edit material and cut out the superfluous. She continues to show interest in her work at which she is very efficient.

SECTION D

CERTIFICATION AND COMMENTS

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE
16 Feb 63SIGNATURE OF EMPLOYEE
/s/ Sandra B. CAZAZZUS

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION
29

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE
16 Feb 63

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE
/s/ Francis J. COIGNE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

The Reviewing Officer concurs in this Report. This employee and her husband form an efficient and valuable team.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
16 Feb 1968	Chief of Station	/s/ Willard C. CURTIS

SECRET

If typewriter is not available, bear down with ballpoint pen to make legible copies.

Standard Form No. 2029 U.S. Govt. Service Commission FPM Supplement E93-1 June 1967		HEALTH BENEFITS REGISTRATION FORM <small>FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM</small> <small>(Read instructions on back of last page. Use only typewriter or ballpoint pen.)</small>				New Carrier's Control No. 11252435	
						Old Carrier's Control No.	
TO EMPLOYING OFFICE: SHOW OLD CARRIER'S CONTROL NUMBER ONLY IF ELECTION IS TO CANCEL ENROLLMENT OR TO CHANGE OPTIONS OR TYPE OF ENROLLMENT IN THE SAME PLAN							
PART A ALL WHO REGISTER MUST FILL IN THIS PART.		1. NAME (LAST) Tarasoff	(FIRST) Anna	(MIDDLE INITIAL) A.	2. DATE OF BIRTH (Two numbers) MONTH DAY YEAR	3. ARE YOU NOW MARRIED? YES <input type="checkbox"/> 1 NO <input type="checkbox"/> 2	
		4. YOUR MAILING ADDRESS (NUMBER AND STREET)	(CITY)	(STATE)	(ZIP CODE)	5. SEX MALE <input type="checkbox"/> 1 FEMALE <input type="checkbox"/> 2	
IMPORTANT							
IT IS ILLEGAL FOR AN EMPLOYER OR A MEMBER OF THIS FAMILY TO BE COVERED UNDER MORE THAN ONE ENROLLMENT. IF YOU ARE ALREADY COVERED THROUGH THE FAMILY ENROLLMENT OF ANOTHER FEDERAL GOVERNMENT OR COLUMBIA EMPLOYEE OR ANNUITANT, YOU MUST REGISTER NOT TO ENROLL OR THE OTHER ENROLLMENT MUST BE CANCELED OR CHANGED TO SEE OTHER. SIMILARLY, IF A FAMILY MEMBER LISTED BY YOU IN PART B IS COVERED THROUGH HIS (OR HER) OWN ENROLLMENT, YOU CANNOT ELECT A FAMILY ENROLLMENT UNLESS THE FAMILY MEMBER CANCELS HIS (OR HER) ENROLLMENT.							
PART B FILL IN THIS PART IF YOU WISH TO ENROLL OR CHANGE YOUR ENROLLMENT IN A HEALTH BENEFITS PLAN.		1. I elect to enroll in a health benefits plan as shown below. I authorize deductions from my salary, compensation, or annuity to cover my share of the cost of this enrollment. (Keep the information requested below from back page of brochure of the plan you select.)				OPTION (HIGH OR LOW)	
		NAME OF PLAN		OPTION (HIGH OR LOW)		ENROLLMENT CODE NUMBER	
2. In space below list all eligible family members without exception. List your wife or husband first, then your unmarried child or under age 22, including (a) legally adopted children and (b) stepchildren, foster children, and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 22 who became disabled before age 22 and who, because of the disability, is incapable of self support. (Attach a doctor's certificate for a disabled child age 22 or over, if one is not already on file.) DO NOT LIST PARENTS OR OTHERS WHO ARE NOT ELIGIBLE FAMILY MEMBERS. THEY WILL NOT RECEIVE BENEFITS, EVEN IF THEY ARE DEPENDENT ON YOU AND ARE LISTED.		NAME OF FAMILY MEMBERS		DATE OF BIRTH (Month, Day, Year)		NAME OF FAMILY MEMBERS	
If enrollment is for self only, answer Item 1. If enrollment is for self and family, also answer item 2.		Wife or Husband	1	1	1	1	1
If you are changing your enrollment also fill in Part D.			2	2	2	2	2
			3	3	3	3	3
			4	4	4	4	4
			5	5	5	5	5
PART C FILL IN THIS PART IF YOU WISH NOT TO ENROLL OR IF YOU WISH TO CANCEL YOUR ENROLLMENT.		1. I ELECT NOT TO ENROLL IN A PLAN UNDER THE FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM.				2. I ELECT TO CANCEL MY PRESENT ENROLLMENT UNDER THE CODE NUMBER SHOWN BELOW.	
						Present Enrollment Code Number	
PART D FILL IN THIS PART AS WELL AS PART B, TO CHANGE YOUR ENROLLMENT.		ANSWER ITEMS 1, 2, AND 3 TO SHOW ENROLLMENT CODE BEING CHANGED AND ELIGIBILITY FOR CHANGE.					
		1. ENROLLMENT CODE NUMBER OF PRESENT PLAN.	2. NUMBER OF EVENT WHICH PERMITS CHANGE (See table on back of duplicate for proper number.)	3. DATE OF EVENT WHICH PERMITS CHANGE	MONTH DAY YEAR		
PART E ALL WHO REGISTER MUST FILL IN THIS PART.		for Anna A. Tarasoff 12-28-67 (YOUR SIGNATURE—DO NOT PRINT) 12-28-67 (DATE)				WARNING.—Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001.)	
PART F TO BE COMPLETED BY AGENCY.		1. NAME AND ADDRESS (INCLUDING ZIP CODE) OF EMPLOYING OFFICE <i>Joe Hayes</i> HEADQUARTERS OFFICES REGALIANA (EX-DELEGATE)				2. DATE RECEIVED IN EMPLOYING OFFICE 12-28-67	3. EFFECTIVE DATE OF ELECTION 12-31-67
						4. PAYROLL OFFICE NO.	5. SF 2811 REPORT NO.
REMARKS FOR USE ONLY BY AGENCY.		Contract Emp. 9-8-67 WH				5132830	

14 00000
SECRET

DATE 22 November 1967

MEMORANDUM FOR: Chief, Insurance Branch/BSD/OP
Benefits and Services Division

This is to advise you that Anna A. Tarasoff has been employed under an Agency personal services contract effective 8 September 1967. The Contract authorizes participation in Civil Service Retirement, FEGLI and Federal Health Insurance.

Subject's contract is the administrative responsibility of DDP/WH.

Dow H. Luetscher
Chief
Contract Personnel Division

SECRET

Group I - Excluded from automatic downgrading and declassification

S E C R E T

Chief of Station, Mexico City

X

Chief, Western Hemisphere Division

Sandra B. CAZAZZUS, Contract

Action Required: As Noted

References : A. BD-6144
B. MEXICO CITY 2718

1. In view of Reference B and inasmuch as Sandra B. CAZAZZUS was in the Headquarters area, a new contract was prepared granting her the benefits of Reference A. The contract was signed by CAZAZZUS and has been forwarded for related processing.

2. Attached is a copy of the contract effective 8 September 1967 for CAZAZZUS. She elected FEGLI but declined the health insurance as she is included under her husband's policy. CAZAZZUS was thoroughly briefed on the provisions of the contract as well as the provisions of her previous contract.

STATION ACTION:

As CAZAZZUS is payrolled by the Station, related deductions for the new benefits (Civil Service Retirement and FEGLI) are to be made by the Station. Social Security deductions will, of course, cease as there is no cover requirement for mandatory Social Security coverage.

3. During the briefing, CAZAZZUS inquired about the use of sick leave. She was informed sick leave can be used in the same manner and per the same regulations as when she was formerly a

(continued)

Attachment:
As stated

Distribution:
2-COS, Mexico City, w/att, h/v

HMGIS - 5679

S E C R E T

WH/Contracts/WSRenehan: gms (17 Nov 67) 4460

1-WH/Contracts w/att
1-WH/1 w/att
1-WH/Reg wo/att
C/WH/1

S E C R E T

HMMS - 5679

staffer. The point involved was whether she had been granted sick leave during her "maternity leave" in 1965. She was advised that possibly she did receive payment covering the period which her accrued sick leave represented; and, possibly at that time she had only a minimal balance accrued.

STATION ACTION:

It is suggested the Station review her leave/pay account for the above cited period and advise her of the details involved.

Should the records reflect she had a balance but was not provided the leave, a pay adjustment may be made up to the balance at that time with an appropriate reduction of her current sick leave balance. NOTE: She was advised she could not have sick leave accrued since that time applied retroactively.

It is further suggested the Station Admin or Finance Officer conduct the briefing due to the necessity for the briefer to have a rather technical knowledge of leave.

Hugh E. WESTBY

1400000

1971 8 Sep 67

Miss Sandra B. Cazzazus

Dear Miss Cazzazus:

The United States Government, as represented by the Contracting Officer of this organization, hereby contracts with you, as a contract employee under the terms and conditions set forth below:

1. New Benefits. By virtue of your employment relationship under this agreement you are:

(a) Covered under the Civil Service Retirement Act in conformance with rules and regulations applicable to appointed employees of this organization. From the basic compensation paid you hereunder there shall be deducted the appropriate rate percentage (presently 6-1/2%) for deposit and eventual crediting to the Civil Service Retirement Fund. Social Security deductions required by virtue of your cover activities will not be reimbursed you by this organization.

(b) Covered under the Federal Employees Group Life Insurance Act in conformance with rules and regulations applicable to appointed employees of this organization unless you execute a written waiver of such coverage. The Government is presently authorized to bear a portion of the premium cost, you will bear the remainder.

(c) Eligible for coverage under the Federal Employees Health Benefits Act in conformance with rules and regulations applicable to appointed employees of this organization. The Government is presently authorized to bear a portion of the premium cost, you will bear the remainder. Because of your eligibility under this Act (whether or not you choose to enroll), your coverage under the contract employees health program shall cease thirty-one (31) days after the effective date of this agreement.

2. Your previous contract with the United States Government, effective 15 July 1964, is herein terminated by mutual consent of the parties thereto.

3. All provisions of said previous contract not in conflict with this agreement are incorporated by reference into and made a part of this agreement.

SECRET

4. This agreement is effective as of September 1st and shall continue thereafter for two (2) years unless sooner terminated as set forth in your previous contract. If this agreement becomes effective during an overseas assignment nothing contained herein shall be construed as extending that assignment beyond its originally contemplated duration or invalidating your entitlement to return travel expenses (if applicable) upon completion of that assignment.

UNITED STATES GOVERNMENT

BY _____
Contracting Officer

ACCEPTED:

Sandra B. Cazzazza

WITNESS:

APPROVED:

DISPATCH**SECRET**

REF ID: A6500

City of Mexico, Mexico City

MURKIN

NO INTRINSIC
ONLY QUALIFIED DIS
CAN JUDGE, INDULG

MICROFILM

TO:

FROM:

SUBJECT:

ACTION REQUIRED:

City, Mexico

ADM/JCET - PECHLAK/CARAZZI - Tax Scrapping

REFERENCE:

The NSCID Tax Committee has approved a flat rate assessment of PECHLAK/CARAZZI's Federal tax obligation, beginning with tax year 1967. Attached is the letter of tax instruction which PECHLAK should review. The original must be signed and returned to Headquarters.

VICTOR D. GRIMM

Distribution:

 Orig. & 1 - COB (w/att)
 1 - WII/Contracts (w/att)

DISPATCH NUMBER	DISPATCH SYSTEM AND NUMBER	DATE
	HSC-5711	14 Nov 1966 6 December 1967
CLASSIFICATION		REF ID NUMBER
SECRET		

Letter of Tax Instruction for FAINGLANS/CAZAZZUS

1. Based on discussions held with tax representatives of the Organization, an assessment of your organizational income has been approved to satisfy your Federal tax obligation.

2. The assessment computation is based on an estimate of your taxable compensation from the Organization and your estimate of other income from outside sources. The assessment computation results in a percentage of your salary being withheld each pay period to completely satisfy your tax obligation. For tax year 1967 thirteen and nine-tenths (13.9) per cent will be withheld, effective 28 August 1967. The computation is attached.

3. In computing your assessment rate, you have been granted a basic tax credit of \$250.00. This credit is not guaranteed, but is granted to give reasonable assurance that you will not pay a higher tax than you would under ordinary reporting procedures.

4. Future changes in your income or tax status may justify a revision of the assessment rate. In this event this agreement would be amended accordingly.

5. It is important that you file a tax return directly with Internal Revenue [REDACTED] Care and accuracy in preparing this return are necessary. Any tax liability resulting from the tax computation on this return will be satisfied by your own funds. A certified true copy of this tax return must be forwarded to us upon your submission of the original to Internal Revenue. Provided below are specific criteria to assist you in the preparation of the tax return:

A. You will be provided with the [REDACTED]

B. The income that is shown [REDACTED] will be reported on the Form 2555 (Statement to Support Exemption of Income Earned Abroad) and will be exempted from tax, due to your residence overseas. You will base your exemption on physical presence abroad. For tax year 1967 you will report your income as being earned prior to home leave and therefore fully excludable because the qualifying period, which ended on the date you left Mexico for home leave, included an eighteen-month period abroad.

C. Other income must also be reported on this tax return, including interest from the Credit Union, which will be indicated without identifying the Credit Union by name.

14 00000

6. You may request an advance of funds for payment of foreign income or related (income) taxes assessed against income received from or guaranteed by the Organization. Accounting for these funds will be made in the form of copies of the received tax bills (or other acceptable tax documents) which will be forwarded to the home office for approval and write-off of expense.

7. Please acknowledge the original of this letter and return to Headquarters, attention: Covert Tax Committee.

8. We appreciate your cooperation in arranging these details.

VICTOR D. UMITSKY
Secretary
Covert Tax Committee

Acknowledged:

Date _____

SENDER WILL CHE		CLASSIFICATION TOP AND BOTTOM	
UNCLASSIFIED		CONFIDENTIAL	SECRET
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS		DATE
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ACTION	DIRECT REPLY	PREPARE REPLY	
APPROVAL	DISPATCH	RECOMMENDATION	
COMMENT	FILE	RETURN	
CONCURRENCE	INFORMATION	SIGNATURE	
Remarks: Mr. Kaufman reviewed and declined to coordinate, feeling that time was no longer appropriate for this message. <i>[Signature]</i>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.		DATE	
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FORM 7-66 12 USE PREVIOUS EDITIONS

1. MESSAGES ARE CONSIDERED ROUTINE UNLESS A HIGH PRIORITY IS INDICATED IN THE ADDRESS LINE.
2. TYPE IN BLACK AND YELLOW COPY TO CABLE SECRETARIAT. REMAINING SUPPORTING DOCUMENTS.
3. DO NOT LEAVE OUT AND CONTINUE TYPING. DO NOT EXCEED SPACES FOR CHARACTERS PER LINE, INCLUDING STOPS. END TEXT LINES WITHIN THE EIGHT MARGIN GUIDE APPROPRIATE FOR YOUR TYPEWRITER.

ORIGINATOR: WSRenahan
 UNIT: WH/Contracts
 EXT: 4460
 DATE: 12 September 1967

MESSAGE FORM
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BY _____ PER _____

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CONFIDENTIAL

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CITE DIRECTOR

SECRETTO: MEXICO CITY

REF: DIRECTOR 34619

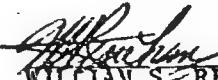
IN DISCUSSING REF WITH FEINGLASS PLEASE EXPRESS OUR SYMPATHY
 DEATH OF CAZAZZUS MOTHER.

END OF MESSAGE

WH Comment: Ref advised CAZAZZUS can take physical on return Mexico.

C/WH/1 _____

4 WILLIAM V. BROE
 5 C/WHD



WILLIAM S. RENEHAN
 C/WH/CONTRACTS

RELEASING OFFICER

COORDINATING OFFICER

SECRET
GROUP 1
 Excluded from automatic
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AUTHENTICATING
OFFICER

COPY NO.

REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED.

INDEX YES NO

CLASSIFY TO FILE NO.

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SECRET 072355Z CITE MEXICO CITY 2718

DIRECTOR

REDCOAT

1. SANDRA B. CAZZUS DEPARTING SEP WITH MINOR SON FOR MOTHER'S FUNERAL IN CLEVELAND, OHIO. SHE UNABLE COMPLETE PHYSICAL HERE, PLANS DO SO AT HQS.

2. ALSO INCOMPLETE IS CONTRACT REVIEW FOR NEW BENEFITS PER BOOK DISPATCH 6144. STATION SUGGESTS THIS BE ACCOMPLISHED AT HQS DURING FEINGLASS CONSULTATION

31 OCT.

SECRET

SECRET

BT

8 SEP 67 R 47816

A Contract

19/8/67

Exhibit A

Physical as dependent
will be taken at Hqs
259 cont of 81

Hqs. & take will
done Subjet
already at Hqs will continue D/R

when she is available
Avail in 1967 Q3/67

18 August 1967
v1vr
WH/Personnel
6815
18 August 1967

MESSAGE FORM
TOTAL COPIES (13)

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BRANCH

RPT

C/WH/6

BID COPY

INFO

PER

vs *class 3 step plan*

(Location)

(Date and time issued)

(Leave blank)
Reference number

S E C R E T

MEXICO CITY

10 22 00'Z

CITE DIRECTOR

29114

RYBAT

REF: A. MEXICO CITY 2499 (IN 34006)
B. HMMS-5433

1. TDY HQS INCLUDED IN FEINGLASS TRAVEL ORDER. SHOULD PLAN ARRIVE HQS 31 OCTOBER 1967.

2. FAMILY SHOULD TAKE PHYSICALS IN FIELD AND FORWARD RESULTS. FEINGLASS WILL TAKE PHYSICAL WHILE HQS.

3. REF B POUCHED 16 AUGUST ANNOUNCES ARRIVAL TDY REPLACEMENT 18 SEPTEMBER 1967.

END OF MESSAGE

WH Comment: Ref A requested home leave beginning 12 Sept. with TDY HQs. to discuss 1968 retirement.

Ref B gave info on TDY replacement for FEINGLASS.

Paul L. Hansen Jr.
JACOB D. ESTERLINE
AC/WID

C/WH/1 *JL*

ISSUING OFFICE

COORDINATING OFFICES

S E C R E T

GROUP 1
Excluded from automatic
downgrading and
declassification

AC/WH/PERS

AUTHENTICATING
OFFICES

REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED.

COPY NO.

INDEX: YES NO
 CLASSIFY TO FILE NO.
 X-REF TO FILE NO.
 FILE RID RET. TO BRANCH
 DESTROY SIG.

CLASSIFIED MESSAGE		TOTAL COPIES <i>18</i>
SECRET		<small>DISCLOSURE PROHIBITED REPRODUCTION AND TRANSMISSION PROHIBITED</small>
PERSON/UNIT NOTIFIED		

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ACTION *7* **D/115 2** RID COPY ADVANCE COPY PRIORITY LATENT VIDEO

INFO *FILE VR WITH 8 CSES 3 PS OP2*

SECRET 261615Z CITE MEXICO 1893

DIRECTOR

26 JUN 67 IN 98383

HBDRAW

REF: MEXICO CITY 1888 (II) 97294

CAZAZZUS ILLNESS DIAGNOSED AS FLOATING KIDNEY.
 RELEASED FROM HOSPITAL 24 JUNE 1967. NO OPERATION

PLANNED.

SECRET

SECRET

BT

John R. Gandy Jr.

INDEX: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CLASSIFIED MESSAGE	TOTAL COPIES								
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INFO • FILE, VR, WH, CCSB, OPC										

SECRET 240020Z CITE MEXICO CITY 1888

24 JUN 67 IN 97294

DIRECTOR

HBDRW

SANDRA B. CAZZAZZUS ADMITTED TO AMERICAN BRITISH
 COWDRAY HOSPITAL 22 JUNE 1967 WITH SEVERE ABDOMINAL
 PAIN. PRELIMINARY DIAGNOSED AS KIDNEY DISORDER. WILL
 ADVISE FURTHER.

SECRET SECRET

BT

*Per
June 26
1967*

SECRET

(When Filled In).

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 132830
GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
F						
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION Mexico City		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
CAREER	RESERVE	TEMPORARY	XX INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify): Contract Employee			XX SPECIAL (Specify): Contract Employee			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From To) 1 January 1966-31 December 1966			
SECTION B PERFORMANCE EVALUATION						
D - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.					
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SPECIFIC DUTY NO. 3			RATING LETTER			
SPECIFIC DUTY NO. 4			RATING LETTER			
SPECIFIC DUTY NO. 5			RATING LETTER			
SPECIFIC DUTY NO. 6			RATING LETTER			
OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S

SECRET

(When Filled In)

SECTION C**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and staff effectiveness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

This is the first time a fitness report has been prepared on CAZAZZUS herself, although previous fitness reports on her husband, Douglas J. FEINGLASS, have mentioned her valuable contribution. She and FEINGLASS continue to work as an excellent team. CAZAZZUS works conscientiously and quickly and saves the Station a great deal of time in the routine processing of paper and tapes. Her interest in the subject matter and her analytical ability enable her to weed out superfluous material and assist FEINGLASS in his translations and analyses.

SECTION D**CERTIFICATION AND COMMENTS**

BY EMPLOYEE

1. I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

7 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the rating officer's evaluation of CAZAZZUS.
She complements her husband perfectly

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET

FIELD TRANSMITTAL - FITNESS REPORT

INSTRUCTIONS

The following items of the Fitness Report will NOT be completed by field personnel preparing the report for transmitted to Headquarters:

SECTION A, Items 1, 6, and 7
 SECTION D, Items 1, 2, and 3 (Only in respect to "Typed or Printed Name and Signature")

1. I CERTIFY THAT I HAVE BEEN THIS FITNESS REPORT	DATE 9 Dec 67	TYPED OR PRINTED NAME AND SIGNATURE OF EMPLOYEE (in pseudonym) Sandra B. CAZAZZUS
2. I CERTIFY THAT, EXCEPT FOR ITEMS OMITTED UNDER THE ABOVE INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHED FIT- NESS REPORT HAVE BEEN COMPLETED UNDER PROVISIONS OF CURRENT INSTRUCTIONS OR REGULATIONS		
DATE 9 Dec 67	TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR (in pseudonym) Jonathan L. WEENING	
DATE 28 Dec 67	TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL (in pseudonym) Francis J. COIGNE (Francis) Coigne	
<u>SPECIAL NOTE</u>		
<p>Fitness Reports must be prepared with due regard for security considerations. For example, in the case of administrative and support personnel and others whose duties do not in themselves reveal sources of information and methods of operation, it is normally expected that a complete and realistic statement of specific duties may be reported in Section B. However, the nature, source, purpose or disposition of information or operations will not be included. On the other hand, the position titles and description of specific duties of certain other employees may jeopardize security and should not be fully reported on this form. In these cases, general statements of specific duties will be included in Section B indicating the level of responsibility.</p>		

FORM 450 OBSOLETE PREVIOUS EDITIONS.

SECRET

(4)

SIXTY-FIVE

Miss Anna A. Tarasoff

Dear Miss Tarasoff:

Reference is made to your current contract with the United States Government, as represented by the Contracting Officer.

Effective 22 August 1966, said contract is amended by deleting all reference to income taxes therefrom, and by adding thereto the following paragraph:

"8. Taxes. As an employee of the Government, you must satisfy your Federal tax liability on taxable income paid to you under para. (a) one (1) above. Such income may be paid you by or through a cover facility. Because of cover, operational and security considerations the Tax Committee of this organization is authorized to make certain determinations and establish procedures which will result in the full satisfaction of your Federal income tax liability on said income. It is specifically understood and agreed that such determinations and procedures, whether oral or written, constitute an integral part of this contract and are legally incorporated herein by reference."

All other terms and conditions of said contract remain in full force and effect.

UNITED STATES GOVERNMENT

Contracting Officer

Sixty-five

Group I -- Excluded from Alternative Dispute Resolution

SECRET**DATE:****CTC No.** 3

MEMORANDUM FOR: Director of Finance
ATTENTION: Chief, Compensation and Tax Division
VIA: Chief, Contract Personnel Division
SUBJECT: Tax Assessment for _____

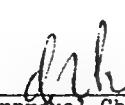
1. A flat rate covert tax assessment of this individual's gross, taxable Agency entitlements has been approved by the Covert Tax Committee as indicated below. An acknowledged letter of tax instruction is will be forwarded.

Tax Assessment Rate	Effective Date
Given and dated this 10th day of June, 1971.	10/1/71

2. Other payroll factors pertinent to this Covert Tax Committee tax assessment action are as follows:

Other tax factors and items:
 - Federal COV. TAX ASSESSMENT
 - STATE TAXES
 - LOCAL TAXES
 - FICA
 - MEDICARE
 - SSI
 - STATE & LOCAL TAXES

A 17% covert tax rate is being applied.


Approval Chief, CPD

Secretary, Covert Tax Committee


SECRET

Anna A. Taraseff

4 June 1966

AMMIS [REDACTED]

Dear Miss [REDACTED]

Reference is made to your contract with the United States Government, as represented by the Contracting Officer, effective 15 July 1966, as amended, which expires 14 July 1966.

Effective 15 July 1966, said contract, as amended, is extended for a period of two (2) years.

All other terms and conditions of said contract remain in full force and effect.

THE UNITED STATES GOVERNMENT

Stillard C. Curtis

ACCEPTED:

[REDACTED]
WITNESS: *Erving G. Chonley*

APPROVED:

BY CONTRACT AUTHORIZING OFFICER

SECRET

DISPATCH

CLASSIFICATION

SECRET

PROCESSING ACTION

MARKED FOR INDEXING

NO INDEXING REQUIRED

ONLY QUALIFIED DESK
CAN JUDGE INDEXING

MICROFILM

TO

Office of Finance

DWO

Chief, WH Division

FROM

Chief of Station, Mexico City

SUBJECT

Admin/Finance-Salary Increase-Sandra B. CAZAZZUS, Employee Number 132830

ACTION REQUIRED - REFERENCES

ACTION REQUIRED: Information only.

REFERENCE: HPMS-4512, dated 6 January 1966

Furnished herewith is a copy of a contract amendment for Sandra B.

CAZAZZUS covering the legislative salary increase as of 10 October 1965.

The amendment was not prepared in time for CAZAZZUS to sign it before going
on home leave and consequently had to await her return.

WILLARD C. CURTIS

Attachment:
As Stated AboveDistribution:
2 - Office of Finance, w/att
1 - Chief, WHD

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE
	HWT-6164 CLASSIFICATION	17 January 1966 HQS FILE NUMBER

SECRET

Anna H
Jacoff

Dear Miss [redacted]

Reference is made to your present contract with the United States Government as represented by the Contracting Officer.

Effective 10 October 1965, said contract is amended by including therein provision for compensation increase of the Federal Employee Salary Act of 1965, in conformance with policies and procedures of the Organization. Said contract is amended also to include the following sentence in paragraph one, entitled "Compensation":

"Compensation will be increased based on legislative pay increases."

All other terms and conditions of the contract remain in full force and effect.

THE UNITED STATES GOVERNMENT

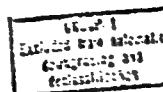
BY Willard C. (Curly)

ACCEPTED:

WITNESS:

Irving A. Rosenthal
Jay S. Weinstein

SECRET



Chief of Station, Mexico City

Office of Finance

Salary Increase - Charles P. Gazzola, Employee Number 127231

The Office of Finance has not received a contract amendment for the 10 October 1965 salary increase which the Station has paid subject as reflected on Station 7/487-66. Therefore, in the absence of a contract amendment, it would appear that GAZZOLA is being overpaid. Please advise.

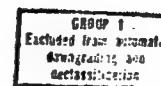
SHIRLEY E. TEPAN

Distribution:
3 - C&TD/Mexico City

EDTG - 2512

6 January 1966

S E C R E T



C&TD/APB/CPAS/ [] /rkm

2294

- 2 - WU Division
- 3 - C&TD/APB/CPAS
- 1 - RI/DP
- 1 - CP/Registry
- X - CPD

WU/BP

WB/ee

14 00000
CLASSIFY TO FILE NO. _____

CLASSIFIED MESSAGE TOTAL COPIES 1

SERIAL TO FILE NO. _____

FILE RID RET. TO BRANCH

DESTROY SIG.

FROM MEXICO CITY

PERSON/UNIT NOTIFIED

SECRET

COL. 1
EX-1
EX-2
EX-3

REPRODUCTION PROHIBITED

1	5
2	6
3	7
4	8

ACTION W.H.P.

INFO RID COPY

ADVANCE COPY

ISSUED SLOTTED TUBED

UNIT

TIME

00

FILE, VR, OF 2, CES 3.

SECRET 081945Z

DIR CITE MEXI 5550

8 DEC 65 10658

REF: DIR 62414

1. 1964 [] FOR BENADUM, LIMOTOR 19 (BARBARA C. HUFF), PINEINCH, SANDAMANIE BEING SENT BY HMMT 6018 IN 10 DEC POUCH. NOT POUCHEO EARLIER AS OVERLOOKED IN STATION ADMIN FILES.

2. [] FOR CAZAZZUS SENT HMMT 5399 APR 23 (JOINT WITH S.A. DOUGLAS J. FEINGLASS). [] FOR LIFUED 30, NOW RITA N. BLAZIK, SENT HMMT 5908, 28 OCT 65.

3. LIHUFF 1 SUBMITTED [] THROUGH OVERT CHANNELS: SIGNED COPY BEING POUCHEO HQS.

4. WILL REPORT ON TICBORN SEPARATELY.

SECRET / A.D. 1964 W.H.P. 1964 10658
7/14 1965 REGULARIZED NUMBER 10658
CFN 5550 62414 1964 BENADUM LIMOTOR 19 BARBARA C. HUFF IS PINEINCH
SANDAMANIE HMMT 6018 10 NOT POUCHEO CAZAZZUS HMMT 5399 APR 23
DOUGLAS J FEINGLASS LIFUED 30 RITA N BLAZIK HMMT 5908 28 65
LIHUFF 1 HQS

BT

SECRET

Dec 23
fba/gjt

SECRET

ANNA M. THAIN-SOFF

Dear Miss [REDACTED]

Reference is made to your present contract with the United States Government, as represented by the Contracting Officer.

Effective 14 August 1964, said contract is amended by including therein provision for compensation increase of the Government Employees Salary Reform Act of 1964, in conformance with the policies and procedures of this organization.

All other terms and conditions of the contract remain in full force and effect.

DIC

*71c wrate 2 72
71c wrate 2 72 P/Hour*

UNITED STATES GOVERNMENT

BY *Millard C. (notis)*
Contracting Officer

SECRET

Group 1 - Excluded from automatic downgrading and declassification.

REVIEWED:

APPROVED:

[Signature]
Special Contracting Officer

DISPATCH



C/WH/SS

CPD

CD 4659 Jerry Wolfe
COS - Mar 19 - Report
5270

DISPATCH

CITY OF CHICAGO

FROM:

Chair of Committee, Chicago, IL
Date:Discretionary Power Committee - Chicago, IL
Chairman and CommitteeREFERENCE: A. DISCHARGE, 15 JULY 1964
B. COUNSEL, 15 JULY 1964

The effect of a new Chicago City Council resolution of 15 July 1964,
which will be effective on 1 January 1965, is to provide a
for a test.

J. P. J. O'LEARY
CHIEF CLERKDistribution:
S - ADD

Arig recd + fwd - 17 Aug 64
W/H/B&F
CFD-5 E69
CFD/CEAS-227 bkt

SECRET

(EVEN WHEN BLANK)

Nº SD 48769 A**DATE**

29 July 1964

I DO HEREBY DECLARE THAT MY TRUE AND LEGAL SIGNATURE IS:

(SIGNATURE)

Anna Tarasoff**RIGHT THUMB PRINT**Anna Tarasoff

(NAME, PRINTED OR TYPEWRITTEN)

WITNESS:Herbert Manell

Herbert Manell

**SECRET****SECRET**

(EVEN WHEN BLANK)

Nº SD 48769 B**DATE** 29 July 1964**I DO HEREBY ACKNOWLEDGE THAT IN MY RELATIONS WITH THE UNITED STATES GOVERNMENT, I WILL USE THE FOLLOWING SIGNATURE WHERE REQUIRED:**

(SIGNATURE)

Sandra B. CAZAZZUS**RIGHT THUMB PRINT**

(NAME, PRINTED OR TYPEWRITTEN)

WITNESS:Gerald F. GESTEINER

Gerald F. GESTEINER

**SECRET**

CONFIDENTIAL
(When Filled In)

CONTRACT TYPE B SECURITY APPROVAL

DATE : 15 July 1964

YOUR REFERENCE: Memorandum dated 13 July 1964

CASE NO. : 131751

TO : WH/PERS

SUBJECT : TARASOFF, Anna A.

1. This is to inform you of Security Approval of the Subject person for Contract Type B employment as specified in your request under the provisions of Headquarters Regulation 20-53.

2. Unless arrangements are made within 60 days to contract with Subject within 120 days, this Approval becomes invalid.

3. This office is to be advised when a Contract is signed by Subject and when the Contract is terminated.

4. As a part of this contracting process:

A polygraph interview must be arranged by your office.

A polygraph interview is not necessary.

W. A. Osborne
W. A. Osborne

CHIEF, PERSONNEL SECURITY DIVISION, OS

SECRET

REQUEST FOR APPROVAL OR INVESTIGATIVE ACTION <small>Always handle copy of this form</small>		DATE 13 July 1964
TO: <input checked="" type="checkbox"/> CI/Operational Approval and Support Division <input checked="" type="checkbox"/> POLITICAL SECURITY Division/Office of Security	FROM: WH/PERS CH-4408	
SUBJECT: <small>(Type name)</small> Tarasoff, Anna	PROJECT Station Support	
CRYPTONYM, PSEUDONYM, AKA OR ALIASES	CI/OS FILE NO. RI 201 FILE NO. SO FILE NO. 131751	
1. TYPE ACTION REQUESTED		
<input type="checkbox"/> PROVISIONAL OPERATIONAL APPROVAL	<input type="checkbox"/> PROVISIONAL PROPRIETARY APPROVAL	
<input type="checkbox"/> OPERATIONAL APPROVAL	<input type="checkbox"/> PROPRIETARY APPROVAL	
<input type="checkbox"/> PROVISIONAL COVERT SECURITY APPROVAL	<input type="checkbox"/> COVERT NAME CHECK	
<input checked="" type="checkbox"/> COVERT SECURITY APPROVAL Type B	<input type="checkbox"/> SPECIAL INQUIRY (SO field investigation)	
COVERT SECURITY APPROVAL FOR LIAISON WITH U.S. OFFICIALS		
2. SPECIFIC AREA OF USE Mexico City, Mexico		
3. FULL DETAILS OF USE Her principal responsibility will be to assist her husband, a Staff Agent, in the transcribing and processing of the Station's LIENVOY/LIEMRICK product. Subject resigned from staff employee status on 8 September 1963. She has been with her husband in Mexico during interim period		
4. INVESTIGATION AND COVER		
A. U.S. GOVERNMENT INTEREST MAY BE SHOWN DURING INVESTIGATION?		YES NO <input checked="" type="checkbox"/>
B. CIA INTEREST MAY BE SHOWN DURING INVESTIGATION?		YES NO <input checked="" type="checkbox"/>
C. IS SUBJECT AWARE OF U.S. GOVERNMENT INTEREST IN HIM?		YES NO <input checked="" type="checkbox"/>
D. IS SUBJECT AWARE OF CIA INTEREST IN HIM?		YES NO <input checked="" type="checkbox"/>
E. INDICATE ANY LIMITATIONS ON COVERAGE IN THE INVESTIGATION OF SUBJECT.		
F. SUGGEST "COVER PRETEXT" TO BE USED IN CONDUCTING PERSONAL INVESTIGATION OF SUBJECT. IF NO INVESTIGATION OUTSIDE CIA, EXPLAIN FULLY		
G. PRO AND GREEN LIST STATUS		
PRO I. OR EQUIVALENT, IN (2) COPIES ATTACHED		PRO II. WILL BE FORWARDED
PRO III. OR EQUIVALENT, IN (1) COPY ATTACHED		GREEN LIST ATTACHED. NO
H. RI TRACES		
NO RECORD	WILL FORWARD	NON-DEROGATORY DEROGATORY ATTACHED
I. DIVISION TRACES		
NO RECORD	WILL FORWARD	NON-DEROGATORY DEROGATORY ATTACHED
J. FIELD TRACES		
NO RECORD	WILL FORWARD	NON-DEROGATORY
NJ DEROGATORY INFO.	DEROGATORY ATTACHED	
LIST SOURCES CHECKED		
NOT INITIATED (Explanation)		
SIGNATURE OF CASE OFFICER W.S. Renahan	EXTENSION 6577	SIGNATURE OF BRANCH CHIEF W.E. Brooks

DISPATCH

15 J62 61

Tirzoff
Mrs. Anna A. *Tirzoff*

Dear Mrs. Tirzoff:

The United States Government, as represented by the Contracting Officer, hereby contracts with you, as a Contract Employee, for the use of your services and the performance of duties of a confidential nature under the following terms and conditions:

1. Compensation. In full consideration for the use of your services and the performance of specified confidential duties, you will be compensated in amount calculated at the rate of \$2.50 per hour. Payments will be made as directed by you in writing in a manner acceptable to the Government. Taxes will be withheld therefrom and submitted by the United States Government.

2. Benefits. (a) You will be entitled to death and disability benefits equal to those authorized under the Federal Employees' Compensation Act, as amended. Claims by you, your heirs or legal representatives under this paragraph will be processed by the Government in accordance with its procedures in such manner as not to impair security.

(b) You will be entitled to sick and annual leave, equal to and subject to the same rules and regulations applicable to Government employees. Such annual leave may only be taken at times and places approved in advance by appropriate representatives of the Government.

(c) You will be entitled to continuation of pay and allowances in a manner similar to that set forth in the Missing Persons Act (50 U.S.C.A., Am. 1901-1915).

(d) The Government will withhold from the compensation due you under this agreement social security deductions in conformance with the basic social security legislation, as amended, and the procedures of this Organization. For reasons of security, all inquiries concerning your relationship to the social security system shall be made directly to this Organization, and in no event may any such question be presented by you or on your behalf to any representative of the governmental unit responsible for implementing the social security program.

3. Execution of documents. If in the performance of services under this contract you assume the custody of Government funds or take title of record to property of any nature whatsoever and whenever situated, which property has, in fact, been purchased with monies of the U.S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by the Government to evidence this relationship.

4. Secrets. You will be required to keep forever secret this contract and all information which you may obtain by reason thereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1917, as amended, and other applicable laws and regulations.

5. Instructions. Instructions received by you from the Government in briefings, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

6. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government.

7. Term. This contract is effective as of 16 May 1962, and shall continue thereafter for a period of two (2) years unless sooner terminated either:

- (a) By thirty (30) days' actual notice by either party hereto, or
- (b) Without prior notice by the Government in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

Subject to the availability of appropriations, this agreement may be extended upon notice from the Government. Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

By Winston M. Scott
Contracting Officer

ACCEPTED:

George A. Tassaroff
Anna A. Tassaroff

WITNESS: Habert Moore

APPROVED:

APPROVED:

S. ... Contracting Officer

CLASSIFIED MESSAGE

SECRET

ROUTING	
1	4
2	5
3	6

TO : DIRECTOR

FROM : NMIS

ACTION: WH S

INFO : C1, C10Ps, C10R, SR 7, VR

S E C R E T 220218Z

DIP CITE NMIS 19621

2 JUN 1957 04

REDOCT

IMMEDIATE ACTION

REF: NMIS-2202, 11 JUNE 1953

1. PER DISCUSSIONS WITH WALLACE A. DEMOLAT, STATION WISHES EMPLOY WIFE OF DOUGLAS J. FEINGLASS ASAP TO ASSUME PART OF LATTER'S LIENVOY TRANSLATION AND TRANSCRIPTION DUTIES. WOULD FREE HIM TO CONCENTRATE MORE ON PREPARATION ASSESSMENTS-CHARACTERIZATIONS OF SOV COMPLEMENT.
2. REQUEST NMIS INITIATE CLEARANCE. FORWARDING FIELD CONTRACT WHICH WILL BE IN ACCORDANCE REF.

S E C R E T

SECRET

REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED

Read July 9
a.m.
July 13 1957
D. Feinglass
CIA
Copy No. 6

S E C R E T

Chief of Station, Mexico

XX

Chief, WHD

Wife of Douglas J. FEINGLASS

Please inform Subject that her resignation from staff employee status has been processed and made effective as of 8 September 1963.

END OF DISPATCH

Distribution:
2 Mexico City

HWMS-3145

23 September 1963

S E C R E T

WH/PERS

W.S. Renchan

ecm

7555

Distribution:
1 - WH/Reg
1 - WH/PERS

C/WH/3

DISPATCH		CLASSIFICATION SECRET	PROCESSING ACTION X MARKED FOR INDEXING NO INDEXING REQUIRED ONLY QUALIFIED DESK CAN JUDGE INDEXING MICROFILM
TO	Chief of Station, Mexico		
INFO			
FROM	Chief, WHD		
SUBJECT	Wife of Douglas J. FEINGLASS		
ACTION REQUIRED REFERENCES			

1. The wife of Douglas J. FEINGLASS has asked that she be considered for employment in a contractual capacity. She was advised that biographic information would be forwarded and that whether or not her services were used would be up to the Station.

2. Subject has previously submitted her resignation from staff status and was processed out effective 7 June and placed on 90 days LWOP. In the event there is a requirement for her services within the 90 day period, she may be hired in a contract capacity without further clearances. Her contract should contain provision for Civil Service coverage; other benefits would be in accord with her contractual status as outlined in FHB 20-1000-1. At the time the contract is forwarded Headquarters, a functional description of her duties should also be forwarded.

3. Subject is scheduled to leave with her two children by train in 16 June. She and the children will enter on tourist cards. They have also applied for regular passports.

END OF DISPATCH

Attachment:
Biographic Profile, USC

Distribution:
3 Mexico City, w/att. USC

SECRET//RYBAI

SEPARATE COVER ATTACHMENT

JMM-S-2980

DOB: 5 May 1923

POB: Cleveland, Ohio

HIGH SCHOOL GRADUATE: 1942

CHILDREN: Daughter - Barbara, 21 Dec 1945

Det. - B-1004, 20 Mar 1949

EXPERIENCE: 1944 - 1945 Cleveland Trust Co., Cleveland, Ohio
Commercial Bookkeeper

1955 - 1956 American Trust Co., San Leandro, Calif.
Commercial Bookkeeper

8 Apr 1957 EOD KUBARK, Clerk, GS-4

14 Jul 1957 PBJointly, Clerk

9 Mar 1958 KUDESK, Intell Clerk

2 Nov 1958 Promotion, GS-5

8 Jan 1961 Promotion, GS-6

7 Jun 1963 LWOP for 90 day

1990-001-00002 - Small Parts 84

51 - 30 June 1962, Overall Rate
(Based on Material #BII)

FITNESS REPORT: 30 June 1961 - 30 June 1962, Overall Rating "A"
(Transliterates Russian Material "P")

TRAINING: Basic Supervisors, 2-13 May 1960

TEST: Russian; Reading "E"

SECRET//RVBAT

MEMORANDUM RECEIPT

7 June 1963

DATE

TO: W.S.Renehan, WH/Pers

FROM: Mrs. Anna Tarasoff

SUBJECT: Receipt of Advance of Funds for Transportation from Washington, D. C. to Mexico City

I hereby acknowledge receipt of the following:

\$525.00 in conjunction with Subject. It is understood that this advance is for ~~the~~ lowest first class rail travel Washington to Mexico City, Mexico and related costs, and anticipated per diem for three days for myself and two dependent children. Accounting for the advance will be submitted to the Mexico City Station.

Please return _____ signed copy(ies) of this receipt

(Anna) Tarasoff

Anna Tarasoff

SIGNATURE OF RECIPIENT

7 June 1963

DATE RECEIVED

(25)

To _____

Form No. 752 REPLACES FORM 50-88
1 AUG 53 WHICH MAY BE USED.

SECRET

7 June 1963

MEMORANDUM FOR: Personnel Security Division,
Office of Security

SUBJECT: Mrs. Anna Tarasoff, Contract
Employee Clearance

1. It is requested that clearance be granted for the employment of Mrs. Anna Tarasoff as a Contract Employee, Type A or B at the Mexico City, Mexico Station to provide clerical services.

2. Mrs. Tarasoff is presently a GS-6, staff employee. She is being reassigned to the CS Development Complement and placed on a 90 day LWOP status effective COB 7 June in order to join her husband.

3. In the event the Mexico Station can use her services she would be employed in a contractual capacity and her resignation from staff employee status would be effected the day prior to the effective date of contract.

4. In the event additional information is desired, please contact Mr. William Renchan, extension 7565.

W. E. BROOKS
Chief, WII Support

SECRET

(When Filled In)

Recd from [unclear]

DATE PREPARED

5 June 1963

REQUEST FOR PERSONNEL ACTION							
SERIAL NUMBER	NAME (Last-First-Middle) 069935 TAKADOFF, ANITA						
2. NATURE OF PERSONNEL ACTION LWOP AND REINSTATEMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 6 7 63			
6. FUNDS 				A V TO V CF TO V		V TO CF CF TO CF	
8. ORGANIZATIONAL DESIGNATIONS DOP CI STAFF CI DEVELOPMENT COMPLEXITY				9. CATEGORY OF EMPLOYMENT REGULAR			
11. POSITION TITLE INT'L CLERK				10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0313.01		12. POSITION NUMBER SL 29971		13. CAREER SERVICE DESIGNATION D	
16. REMARKS REASON: DOP CI STAFF/SPECIAL INVESTIGATION GR-CIP/PROJECTS BR/INT'L CLERK/WASH., D.C./0151 Employee's last working day 7 June 1963. LWOP (HHD 10-1 Para. 10 a.) Leave of absence to accompany husband to new station - not to exceed 90 days. cc to security and finance				17. GRADE AND STEP 6 4		18. SALARY OR RATE 5,565. 2.67 2542	
19. SIGNATURE OF REQUESTING OFFICIAL <i>Dorothy Bresnahan, STAFF</i>				DATE SIGNED 5 Jun 63		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION DO. (MILIT. CODE)	22. OFFICE CODING NUMERIC	23. STATION CODE ALPHABETIC	24. MIE. DATE OF BIRTH CODE	25. DATE OF DEATH CODE	26. DATE OF DISCH. CODE	27. DATE OF LEV. CODE	
28. MIE. EXPIRES MO. DA. YE.	29. SPECIAL REFERENCE CODE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CARRIED OVER/TERMINATION DATA CODE	33. SECURITY REG. NO. CODE	34. CER. NO.	
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 yrs. 2 - 10 yrs.	36. SERV. COMP. DATE MO. DA. YE.	37. LONG. COMP. DATE MO. DA. YE.	38. CAREER CATEGORY CODE	39. FEAT / HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO.		
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE (LESS THAN 3 YRS) 2 - BREAK IN SERVICE (MORE THAN 3 YRS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA CODE	44. STATE TAX DATA CODE	45. G.P. APPROVAL	46. DATE APPROVED		
FORM 1152 OBSOLETE PREVIOUS EDITION 4-62 AND FORM 1152a							

SECRET

GROUP 1
EXC. FROM AUTOMATIC DOWNLOADING
AND DECLASSIFICATION

PUBLIC SCHOOLS
DISTRICT OF COLUMBIA

**WOODROW WILSON
HIGH SCHOOL**

PUPIL'S PERMANENT RECORD

		LAST NAME OF PUPIL TARASOFF		FIRST NAME BARBARA		MIDDLE NAME <i>Barbara</i>		DATE OF ENTRY FROM 9-6-61 Kramer Jr.				
		PARENT OR GUARDIAN Maria Deltri Tarasoff		OCCUPATION Analyst - U.S. Government				DATE OF ENTRANCE TO				
		RESIDENCE 5109 - 45th Street, N.W.		TEL EM 2-6990				DATE OF RE-ENTRY FROM				
		RESIDENCE		TEL				DATE OF RE-ENTRY TO				
		PLACE OF BIRTH Ohio				DATE OF BIRTH 12-22-45		SCHOOL				
MONTH GRADE	YEAR GRADE	SECTION		YEAR GRADE	SECTION		YEAR GRADE	SECTION		YEAR GRADE	SECTION	
		SUBJECT	TEACHER		SUBJECT	TEACHER		SUBJECT	TEACHER		SUBJECT	TEACHER
English	A.1	English 2H	B.G. A.A.1	English 3H	L.R.G. R.	English		English		English		
U.S. & World History	A.1	U.S. HISTORY		U.S. HISTORY		Government		Government		Government		
Geography	A.1	PHYSICAL GEO.	A.H.C. C.P.1	French 1H	H.L.F. A	French		French		French		
Physics				French 2H	H.L.F. A	French		French		French		
Chem. & Phys.				French 3H	H.L.F. A	French		French		French		
Latin I & II	A.1	Latin	A.Y.S. A.A.1	Latin 4H	S.W.R. A	Latin		Latin		Latin		
Latin I & II	A.1	Spanish		Spanish		Spanish		Spanish		Spanish		
Math.				Algebra 1P	R.A.M. R	Math		Math		Math		
Cal. & Alg.				Algebra 2P	J.E. M	Calculus		Calculus		Calculus		
Biology	A.1	C.B.R. H. A.H. B.B.1										
UNOFFICIAL												
U.S. History 2S ² A.1												
TEST RECORD		Physical Ed. 2nd		Physical Ed. 3rd		Physical Ed.		Physical Ed.		Physical Ed.		
Military Science		Military Science		Military Science		Military Science		Military Science		Military Science		
DEPT. 1 SEM. II		DEPT. 1 SEM. II		DEPT. 1 SEM. II		DEPT. 1 SEM. II		DEPT. 1 SEM. II		DEPT. 1 SEM. II		
Department		A.1		Department		A		Department		Department		
Days Present		91% P1		Days Present		90%		Days Present		Days Present		
Days Abs. Ex.		1 1/2		Days Abs. Ex.		2 1/2		Days Abs. Ex.		Days Abs. Ex.		
Days Abs. Unexc.		-		Days Abs. Unexc.		0		Days Abs. Unexc.		Days Abs. Unexc.		
Times Testy		-		Times Testy		0		Times Testy		Times Testy		

Son - Raymond